September-October, 1965

MEDICAL MISSIONARY

Themes of the Church Today

V

FREEDOM

FREEDOM from need * from ignorance, illness, injustice *
from the tyranny of one's own self * from sin and death *
Freedom to be and to become, and to direct oneself

Everyone wants it * Christ gives it * IS it *
He paid its price * OBEDIENCE

Liberty has its own law * not an easy one * not partial *
It claims the whole of a man. *
FREEDOM is the ultimate obedience

Liberty's law is no dead letter * Born of the Spirit *
Love legislates spontaneously * from within *
with the wisdom of another world

The Church is a city of freedom * of men made free by truth *
of sons not slaves * wholly responsible for truth *
Christ's truth * one's own truth * the truth of man * the truth of things

Christ's Freedman loves the truth * does God's will with all his heart *
He needs no other law

Sr. M. Lawrence, S.C.M.M.

THE MEDICAL MISSIONARY

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Cover: Sister M. Martina makes friends with a child with a head injury at Holy Family Hospital, Techiman, Ghana.

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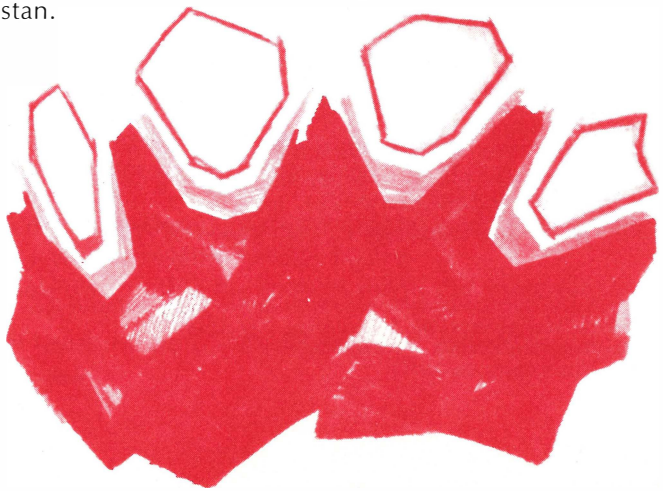
THIS ISSUE . . .

Freedom, our theme for September-October, is a word on the lips of individual men and even upon whole peoples. It is as big as a newborn nation and yet as personal as a man's own dignity. Each one understands freedom in the measure of his own possession of it. Those bound by hunger, ignorance, disease, can know it very little; those shackled by their own selfishness and passion hardly realize how "unfree" they are. On the other hand, true sons of God, who know Him and themselves as His creatures, taste freedom all day long—in love, in choice, in responsibility. Particularly is this true of men and women who have freely bound themselves by vows of religion, as Sister M. Lawrence points out in FREEDOM IN RELIGIOUS OBEDIENCE.

Celestina Lakra, an aboriginal girl from central India, newly capped as a registered nurse, told her story of freedom to Sister M. Pierre. Having been given the opportunity to be a "full self," the future holds promise and potential for her, undreamed of by others of her circumstances. Like her, but on a larger scale, freedom from pagan superstition and ignorance has opened new vistas for the mothers of Ghana, as related in FREEDOM: KEY TO IMPROVED MATERNITY CARE by Sister Rosemary, a nurse-midwife in the heart of that country.

The obligation of those who live in freedom to make its blessings available to others comes through strongly in Sister M. Loyola's account of Ojit, Shujit and Ronjit, Bengali boys. "As each individual is given the opportunity to live fully, to situate his struggle in areas beyond that of mere survival, the whole human race is enriched." As groups of people break through ancient barriers and attain to nationhood, the family of nations comes to fuller maturity. Medical Mission Sisters who have been a part of the emergence of some of the new nations, write eye-witness accounts of what independence day was like in WE WERE THERE. Read their account of what new-found freedom meant in Ghana, Uganda, Kenya, India and Pakistan.



WE WERE THERE!

Birth is always exciting. To be present when a bundle of life breaks through into a new and independent existence is a gratifying experience. To be present when a whole society emerges to attain the status of independent nationhood is even more so. It is a unique moment, one which the Medical Mission Sisters have been privileged to share with the people of a number of newly independent nations. In the following pages, eyewitness accounts invite us to relive the birth days of five of these nations.

Shouting and song, shirts and caps designed with the new flag, convince Sister Marianne that it's Independence Day for Ghana.

GHANA

SISTER MARIANNE

Parades, fireworks, feasting and dancing ushered in March 6, 1957, Independence Day for Ghana, eighth of the newly independent African states. The new flag, with its red, yellow and green stripes and its black star in the center, was displayed everywhere and in every form—in the roundabout in the heart of the town, on the roof of the church, on the walls of the Council building, on the signposts of the gas stations, and on the cement posts of the hospital gate.

Everyone shouted, yelled or sang in a cheerful melody, "Freedom, Freedom." As there is no literal translation, the English word was frequently used. One teacher asked the Sisters, "What does that freedom mean for us?" To be self-governing, to vote, to choose, to determine would be their privilege and responsibility from that day on. The motto of the Convention People's Party was very challenging: "Forward Ever—Backward Never." In one of his speeches during the week of celebrations, Dr. Kwame Nkrumah said, "The welfare of our people is our chief pride and it is by this that my government will ask to be judged. Equally we shall be proud indeed if some of those who have not yet trodden the path of freedom draw inspiration from us and find themselves able to follow soon in our steps."

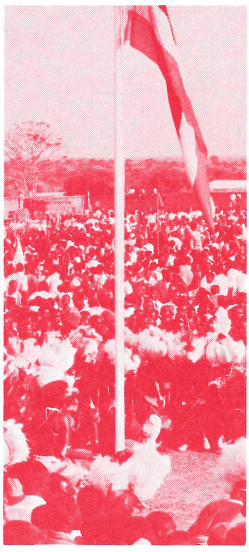
UGANDA

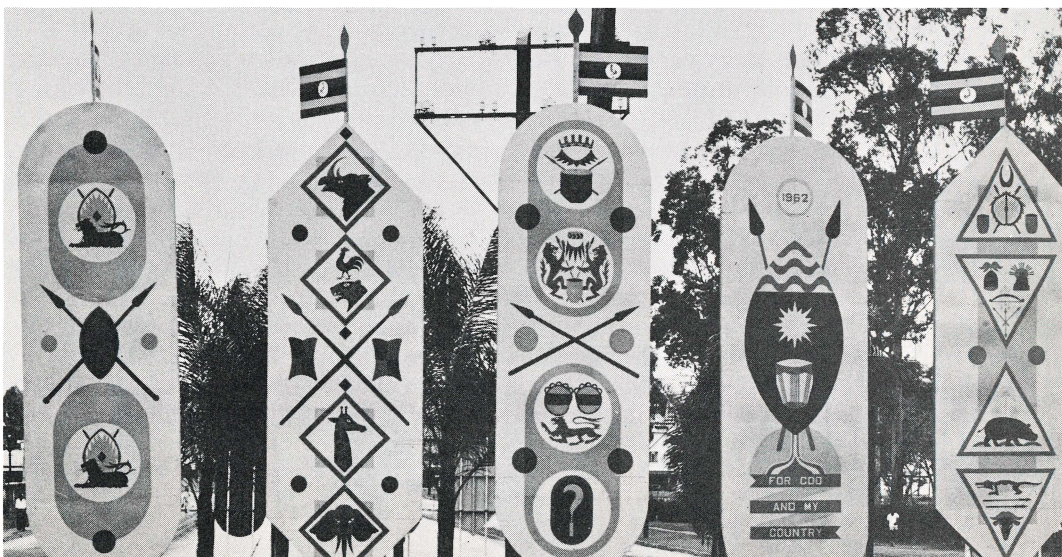
SISTER M. DARRAH

When we arrived in Uganda just two weeks before Independence Day (October 9, 1962), the airport was decorated with bamboo arches and 9-foot shields, all in red, yellow and black, the colors in the flag of Uganda (red for brotherhood, yellow for the sun and black for the Africans).

By Independence Day we were miles away from the big celebrations of the capital city. It was interesting to see what the day meant to the people in a small village. Colored flags surrounded the mission in Fort Portal where, after High Mass, three drummers and three buglers led the school children in a parade. Then one of the Africans gave a speech explaining what Independence Day meant. He thanked both the British and the missionaries for the part they had played. The new national anthem was sounded, though not many could sing it as it is in English, but everyone clapped heartily throughout the great moment of the raising of the flag. That day as well as the day before and the day after were holidays.

The African Sisters with whom we were staying were afraid there might be fighting or rioting that day. There were rumors that the name of the town, Fort Portal, would become Kabarole, the name of the king's hill. But it turned out to be a peaceful day in the village, in the town, and throughout the country.





9-foot shields in red, yellow and black decorate the roadside during Ugandan Independence celebrations.

Witch doctors dance at Nangina as Uhuru *comes to Kenya.*

KENYA

SISTER M. CAMPION

As we entered Kenya on the eve of *Uhuru* (freedom), there was an air of uncertainty and tension. The Mau Mau incidents were still fresh in many minds and planes full of people leaving the country were all too frequent. Kisumu, our nearest town, was nicely decorated, but seemed nearly empty.

"What do you think, Father, should the new Sisters go out to Nangina today?" the Vicar General asked a priest from near our area.

"It's as safe a place as any, tomorrow, I suppose" was the reply. So we went, through 65 miles of bush paths to pioneer in the first mission of the Society to be founded from England.

Uhuru dawned, our first day in our new surroundings among "our" people. Appropriately it started with High Mass. Hearing a whole African Congregation sing the Mass is a wonderful experience. Then came the blessing of the new flag, and while the colours were raised we all stood outside the Church to sing Kenya's new National Anthem. The whole throng of people, friendly, curious and smiling, came over to shake hands and make us feel welcome. Here "in bush" there was little of the tension we felt in the city yesterday, only greetings, laughter, drums and dancing.

We were next invited for the local celebrations in the market place. We watched the tribal dancing, met our Chief and local Elders of the tribe, drank fizzy lemonade and sat down with the women of the household to eat. It is to the credit of past missionaries in this area that the people have come to expect only friendship and service from the Church, and despite our lack of language and the fact that the Fathers and our three selves were the only white faces in the crowd, *because* we were missionaries, we were accepted. We felt we had come home.

Fireworks for India's Independence Day.

INDIA

SISTER M. CYRIL

August 15, 1947. The event of India's Independence from British rule, momentous as it was, stole silently into our life at Holy Family Hospital in Patna City, Bihar. The daily paper announced the news, but the people in the area, Hindus, Sikhs and Muslims, jostled about as usual in the bazaar; shopkeepers and vendors sold their wares; our employees moved about their daily tasks; and the staff made its rounds in the care of its patients. Not too many of the ordinary people were aware at the time that the day was a climax to years of struggle by the political parties, the Congress and Muslim League, with the British power; nor were they aware that Nehru was addressing the new assembly, telling of the awakening of India to a new life and freedom. The fanfare at Delhi did not radiate here, nor did the ominous thunder of Partition with its mass cross-migrations, fanatic fighting, bloodshed and massacres. We were quite some distance from the India/Pakistan border.

A conversation with our cook significantly portrayed a reaction that perhaps millions of his compatriots shared with him. I asked him how he felt about the great day, the independence of his country. With a simple smile and a quizzical expression he wondered what it all meant. He was much more engrossed in the limited sphere of his family than of government affairs and freedom. The latter was such an unfamiliar concept, he couldn't even comment. Bahadur had never gone to school, had not learned to write his name, much less to read a newspaper.

It was, however, in the following years, with ever-expanding developments, that every Indian of any class was able to proudly reap the benefits that come of freedom and a government he could call his own.

PAKISTAN

SISTER M. DOLORES

At the stroke of midnight on August 14, 1947, the dream of the Muslims of India to have their own homeland came true. Pakistan came into being. What should have been a time of great rejoicing was clouded with tragedy. The Hindus and Muslims clashed, causing thousands on both sides to flee from their homes. As the refugees got off trains, bullock carts or buses, one could see sorrow, bewilderment and fear on their faces. They had left all to go to a strange land; some of their loved ones had met death in the struggle.

One of the transit camps for refugees fleeing into Pakistan was near our Holy Family Hospital in Rawalpindi. As we went about the camp giving medical aid, our right-hand helpers were the members of the Muslim League. Every Sister knew she could count on these men in green uniforms. They carried the stretcher cases to the hospital; took care of lost children; helped us to set up some semblance of isolation in the camp for smallpox and typhoid patients; and buried the dead. The Muslim League men organized the transportation of refugees to more permanent settlements, so that the next day's influx of newcomers would have room in the transit camp. There was a turnover of as many as a thousand a day. Many of the men among the refugees gave a helping hand. They did not shirk work. Their leader, Quaid-i-Azam Mahomed Ali Jinnah, had told them that Freedom would mean work, work, work.

Muslim women had been accustomed to seclusion and shelter, but at this time of national crisis, they came out to help their fellow man. They worked in hospitals and camps, collected food and clothing, and joined the teams which met the refugees in the stations.

With sadness and sorrow was courage, determination, and a quiet resignation, as if realizing that the sacrifices to have liberty were worthwhile. Quaid-i-Azam exhorted his people to rise above despair. He said, "We are going through fire; the sunshine is yet to come . . . " He urged them to work with faith, unity and discipline. Freedom had been won. The preservation of it lay ahead.

Sister M. Bernadette brings love and concern to the refugees in Rawalpindi, West Pakistan, during the time of mass migration shortly after Partition.

NOT AFRAID of any road ahead

BY SISTER M. PIERRE

Celestina Lakra sat next to me on the edge of the well, her round face thoughtful, as I asked her about herself. I wanted to know how she, a young Adibasi girl, born and reared in the heart of aboriginal India, would have made up her mind to seek out a career of service at Holy Family Hospital School of Nursing in Mandar, many miles from her own home and many worlds removed from her simple village background.

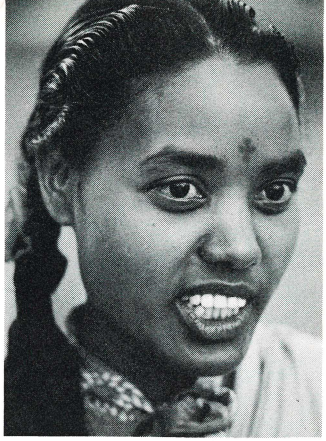
It was easy to tell Celestina was an Adibasi, the original settlers on the land, by her physiognomy and the tattoo marking on her forehead. "A black mixture was pricked into my skin when I was very small," she said, "by a woman who traveled from village to village." Some say the markings are purely decorative; others, that they bear meaning. Celestina's tattoo was a cross, a sign that marked her as a Christian among many who were not.

"My father is a village farmer, Sister, and my mother . . . well, she is just mother for my brothers, sisters and me. We live in Rajawal, far from here, in a mud house right near our farm land and our well. My grandfather was a convert of Father Lievens (the famous Jesuit missionary who helped so many people around those parts)." She said this with pride.

"At first, as I was growing up, I went to the village school but after the fifth class, my parents sent me away to boarding school. They said that I must learn how to read and write very well and learn many other things. When I finished the eighth class, my father wanted me to go for teacher training but I did not want this. I was very bold and I told him, no."

Celestina glanced quickly at me to see what I would say to her daring action. Indian girls don't usually talk back to their parents, at least not to their fathers.

"Finally, he allowed me to go the Ursuline Sisters' high school in Gumla. I spent four years there, only going to my village during the holidays. I liked school very much but we had to study hard. On special days we went to the Gumla market where the people came from miles around to buy and sell goods. This is the biggest market in our whole district and you can buy anything . . . wooden plows and clay pots and straw brushes and even Mandar drums! I used to spend most of my money on bangles. I like to wear many."

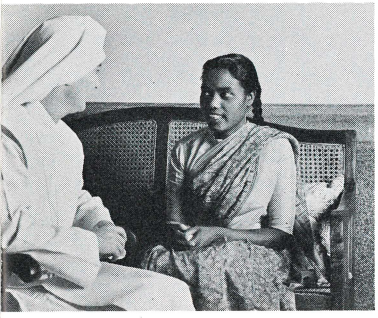


"Still, when I went home for my holidays, my mother expected me to help with the cooking, to carry water from the well and plant in the fields. I liked it better to play with my young brother and sisters who changed so much each time I came home. They put me in charge of a new family of goats . . . the black one was my pet."

"One day while I was at school, my sister had to be taken to the hospital and they brought her to Mandar. I went to visit her and saw for the first time, girls nursing the sick. I could not go back to Gumla that night, so I I stayed in the nurses' hostel and slept with the students. We talked for a long time and I asked many questions about nursing. I remember that they told me it was nice . . . but hard." She smiled up at me at this juncture as if she too might have answered the same way.

"I started college, after finishing at Gumla, but somehow I was not happy. One day, the Mother Vicar called me and suggested that I drop college and think of nursing instead. I went off, almost at once, for an interview at Holy Family Hospital. Sister David talked to me and, within a few days, I was at the front door of the nurses' hostel, being introduced to a group of the students. The next day I was one of them.

"For a whole three months I did not write to tell my parents. I feared they would not want me to be a nurse and I wanted it very much. They do not know what it really means to be a nurse and they would not think it safe for me. Finally, when they learned and knew I was in a Sisters' hospital, they did not stop me."



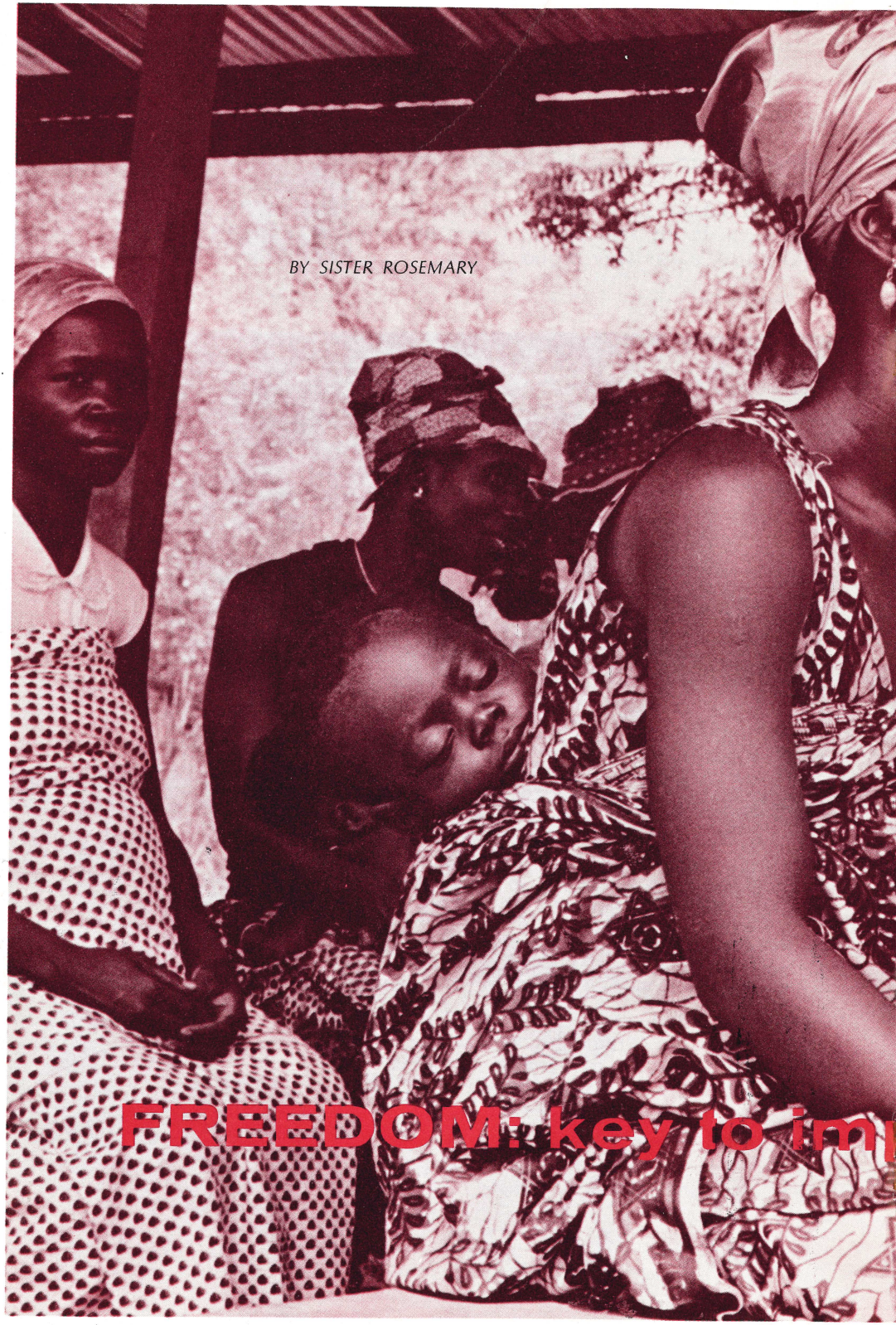
"I think the first six months were the hardest for me, Sister. We dressed in plain white saris and spent most of the time studying and practicing English. Miss Fernandes made us say the words over and over again, until she was satisfied with our pronunciation. I had taken English in school but it was not easy to understand *American* English. Many times when the Sisters spoke to me, I did not really understand. I guess I made many mistakes."

"Still, from the very beginning, I liked being at the hospital and it was a big day when we were given our caps and uniforms. That was at the end of six months. Then, classes really began—anatomy, nursing arts, hygiene—all day long. We worked in the hospital too and, little by little, could do more for the patients. This, I liked the best—to be with the patients. Sometimes I knew them because people come from very far to get cured at my hospital." It was my turn to smile, the way Celestina identified Holy Family Hospital as her own.

"We had to take duty in all the different departments. I was most scared in the operating room but now I don't mind it. In our second year, I noticed Sister used to keep me with the critically ill patients very often. I think she trusted me to do the right thing." This, Celestina remarked in complete simplicity, as if she thought Sister had every right to expect that from her.

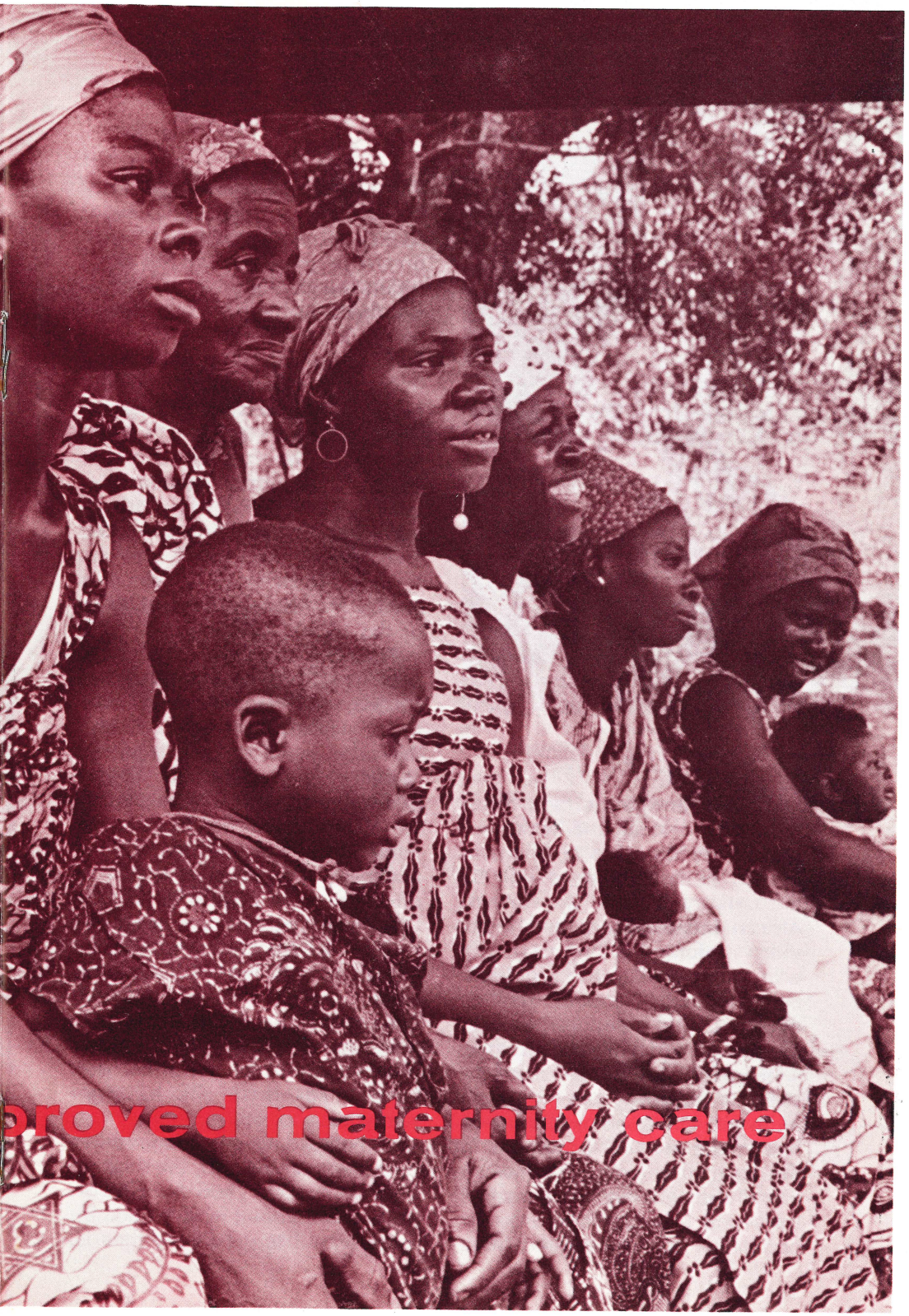
"When we started our public health visiting to the villages around the hospital, I really felt at home. I could show Sister many things that she would not have understood, just because the houses were like my own. In my senior year, I won the prize for the best all-around nurse. I was very proud of that."

Celestina paused in her story, then looked me straight in the face, her black eyes almost glowing. "Next week will be graduation, Sister, and I will leave Holy Family. My father and mother are coming for the ceremony and they will be very proud of the black band on my cap, but I will be proud because I could walk the road from my village to become a real nurse. Now, I am not afraid of any road ahead. I will walk that too."



BY SISTER ROSEMARY

FREEDOM: key to im


roved maternity care

Sister Rosemary (author) demonstrates a point for her midmifery class.

A new and important thrust toward social and health improvement has come to Ghana as a result of independence. In 1957 the country led the way toward African independence and today she is no longer willing to sit and wait for answers to her problems. Everywhere, one sees serious efforts to find solutions, even at the cost of hard work and sacrifice.

In order to better understand the status of maternity care in Ghana today, it would be well to look first at the medical conditions in the country as a whole. Ghana is one of the most deprived areas of the world in a medical sense. Its population is almost seven million. There are approximately 560 doctors, a ratio of 1 doctor to every 13,000 people as compared to 1 doctor to every 750 in the U. S. 1100 State Certified midwives bolster the available maternity care in the country, but this is woefully inadequate when compared to the imposing medical and public health problems which the nation faces.

In days gone by, the supreme voice in obstetrical matters was the village midwife with perhaps occasional consultation from the fetish priest. Even today, the untrained midwife presides with greater or lesser success at 70% of the births.

Traveling from the bush areas into the more developed urban centers, one sees maternity care in all stages of evolution. In the bush, for instance, there is Mame Akua Fordwo, untrained midwife in Kwabenabokrum. Mame Fordwo enjoys great prestige in the community, and well she might, for she has presided at the birth of most of the people in the village. Her methods are not cluttered by theories of asepsis, nutrition, medicine or modern obstetrics. Yet, she is devoted and beloved. Normal deliveries do well under her direction, but there is a high incidence of abnormal deliveries. For these she has few remedies.

Sometimes, even when childbirth has been normal, the mother does not make a good recovery or perhaps the infant is deformed in some way. The procedure then is

to consult the fetish and possibly subject the mother to treatment in an effort to placate the spirits and correct the problem.

Side by side with these practices, there are signs of the struggle by the mothers themselves to claim their right to better care. One night a few months ago a young mother was admitted to the hospital. She had been beaten by her family because she had been in labor many hours and had not "brought forth." Eventually, the family listened to her pleadings and an old aunt brought her to the hospital for admission. It wasn't many hours before she delivered a living male child.

Better and more abundant care is to be found in the larger towns and cities where the available medical personnel cluster. There are approximately 50 hospitals (30 to 100 bed size) scattered about the country. There are only six hospitals of 200 beds or more. In the past there has been an abundance of sub-standard maternity homes. Efforts are being made to eliminate or upgrade them but, because of the scarcity of hospital beds, they cannot now be completely eliminated.

In the cities where better care is available, mothers are encouraged to attend antepartal clinics regularly. The Ghanaian women seem to enjoy these trips and often combine them with their weekly market day. In the clinic, the mothers are seen by trained midwives who refer the mothers with illnesses or complications to the doctor. Most patients are still illiterate and have little idea of dates, therefore fetal gestation can only be roughly estimated.

Anemia is the frequent illness seen in pregnancy. Hemoglobin levels of 8 to 10 grams are ordinary, and all mothers are given iron tonic and vitamins. Patients with hemoglobin levels below this are transfused or given parenteral iron. The high incidence of sickle cell trait, tropical diseases such as malaria, filaria, hookworm and schistosoma are frequent causes of anemias.

So-called high risk patients and mothers who have unsuccessfully attempted to deliver at home are among the most frequent hospital admissions. Since this is so, it is not surprising that approximately 10% of deliveries in 1964 at Holy Family Hospital, Berekum, were operative: Caesarean section, forceps and vacuum extractions. Contracted pelvis is the most frequent reason for operative intervention. A peculiar contracted pelvis appears to be frequent among African women. Multiple pregnancies (twins occur in 6% of our hospital deliveries) with their peculiar problems, hemorrhage and ruptured uteri are not infrequent emergencies.

Mothers generally make good post partal recoveiries. An attempt is made to give a quick course in infant and child care in many hospitals before the mother returns home. Unless complications intervene the mothers rarely return for postnatal examinations.

Newborn nursery is the center of attraction for Sister M. Laboure and proud new parents.

The Ministry of Health estimates that out of every 100 babies born in Ghana, 10 will not live to be one year old. In the bush areas, the figure is considerably higher. Causes of perinatal and infant deaths include illnesses in the mother such as malaria, anemias, and eclampsi; and in the infant: neonatal asphyxia, cerebral injuries, and newborn infections such as tetanus and pneumonia.

Prematurity occurs in 12 to 15% of births. Sufficient trained staff to care for these babies doesn't exist. There is a very noticeable difference between the mortality rates of twins and single births. One of the reasons for this is that so many twins are premature.

Until a few years ago all infants were breast-fed until at least two or three years of age. In the tropics this is almost essential for survival. However, mothers frequently have no concept on how or when to supplement their infants' diets with other foods. Today they are being taught the importance of other foods which are readily available in many areas. While milk and first class proteins are not always abundant, Mothers are learning to use groundnuts, fish and beans which are inexpensive and appetizing, and an ordinary part of the adult diet.

These then, are some of the maternal and infant care problems. The Ministry of Health, with

the aid of mission groups and international health programs, is struggling to solve them. Modern health legislation has established relatively high standards of maternity care for the country. Serious efforts are being made to qualify only suitable candidates for midwifery practice and to eliminate those who pose as legal practitioners. The country aims toward a complete program of socialized medicine. The greatest obstacles have been cost and lack of sufficient trained personnel. Eventually however, when it is achieved, it will mean minimum standard maternity care for mothers and their children even in the most rural areas.

We began by saying that national freedom has played a significant part in the production of better maternity care. In its turn, improved maternity care has enhanced personal freedom. Guidance in hygiene and nutrition has been a step toward freedom from malnutrition and illness and has given a new zest for living. Many women have learned to reject superstitious customs and ideas: that sickness is a sign of the displeasure of the fetish; that twins are an evil omen and must be done away with. Briefly, mothers are being extricated from age-old fears and are learning to live in dignity. Signs of this freedom can be seen on their confident faces as they leisurely await attention in the clinic. One sees it burst forth on a mother's face when she bears a living newborn, perhaps after having brought forth several stillborn infants or newborns who have died. One sees it on the joyful faces of proud new fathers and other family members.

Finally, one senses this freedom in students and even nurses' aides who have learned from repeated experience that when intelligent, Christ-like care is available, childbearing *does* lead to a fuller, richer life, and not to death and tragedy as was so often the case in the past.

BLESSED ARE THOSE WHO DIE IN THE LORD ✝

Please pray for our deceased benefactors:

Rev. Thomas F. Doyle, Hatfield, Pa. ✝ Rev. A. Paul Lambert, Lansdowne, Pa. ✝ Rev. John A. Scully, CSSR, Long Branch, N.J. ✝ Sr. St. Andrew of the Cross, Phila. ✝ Mrs. Rose Anastasio, Havertown, Pa. ✝ Mrs. C. Kremer Bain, St. Louis ✝ Mrs. Edw. Braband, Queens Village, N.Y. ✝ Mr. Edgar Callahan, Baltimore ✝ Mr. Harry Carter, N.Y. ✝ Mr. & Mrs. W. A. Collins, Montreal (parents of Sr. M. Genevieve, SCMM) ✝ Mrs. Catherine Craddock, Roanoke, Va. ✝ Mrs. Owen Gilligan, Fall River, Mass. ✝ Mrs. Jean Hagan, Phila. ✝ Mr. Thomas Healy, Newton, Iowa ✝ Dr. Helen G. Kain, Wash., D.C. ✝ Mr. Thomas Kennally, Meadowbrook, Pa. ✝ Miss Helen Lang, Phila. ✝ Miss Natalie Lloyd, Hillside, N.J. ✝ Mrs. Edw. T. Long, Syracuse, N.Y. ✝ Dr. Norman M. MacNeill, Phila. ✝ Miss Margaret J. McCarthy, Boston ✝ Mrs. Frank B. McMahon, St. Louis ✝ Mrs. Paul Taggart, Wilmington (mother of Sr. M. Barbara, SCMM) ✝ Mr. Lloyd Shea, Cheltenham, Pa. ✝ Mr. Peter Vrabec, Gary, Ind. ✝

LITTLE ISLAND

BY SISTER M. LOYOLA

Civilizations and creeds vary, and with them, the whole complex system of human values. But a man must have health. When he has lost it, he will always experience its return as a liberation, a renewal of his dignity, a vast, immeasurable good for which gratitude can never be adequate.

With Ojit, Shujit and their parents, this became almost tangible. The two boys, 8 and 10 years old, were rushed into emergency room one evening, with badly burned faces and abdomens. Their mother was almost hysterical as she told the story of a normal evening in the one room home.

The meal was over and the three boys, Ojit, Shujit and Ronjit (Bengalis love to give their children rhyming names) were all tucked under the family mosquito net for a long sleep. No one knows how it happened, but suddenly, the little kerosene stove on the earthen floor was tipped over and the net was on fire. The mother made a dash for the youngest, Ronjit, and flew out of the house to call the

neighbors. This decision was almost fatal to the older boys who began to roast alive. Neighbors did come, and soon the whole crowd was on our doorstep.

From the start, Sister Christine, our Sister surgeon, knew that Shujit would do well. His were mostly superficial burns. But with Ojit, it would be different. One whole side of his head and face were affected, as well as his hands, arms and abdomen. The burns were second and third degree.

The boys' father appeared later. He was a minor government employee and had been absent at the time of the accident. His heartbroken reproaches to his wife, mingled with words of comfort, the anxiety in his whole being as he questioned the doctor, his willingness to cooperate, everything about him bespoke love and parental pride. Literally, his whole person was bound up in Ojit and his progress during the ensuing weeks.

Ojit was a charmer. Even if the skin-stretching involved was painful, he never held back a smile. He never complained when skin grafts hurt and was not put out by other children's reactions to his strange appearance. He reflected his father's patient and quiet thankfulness for the help he was getting. The day he left the hospital and the wheelchair he had become an expert at maneuvering, his beaming, scarred face spoke volumes to us.

We have seen hopelessly infected burn cases for which we could do nothing. We have seen many contractures from neglected burns. It is usually too late to improve most of them. But Ojit had had a dangerous mishap, and the best available had been given to him. It was more than the vast majority of his countrymen could hope for in the same circumstances. Perhaps he was a little island in Pakistan where, at the hour of need, there had been a better choice than death, complete disfigurement, or spending a borrowed fortune for incompetent care. Perhaps in a hundred years, by dint of hard work and imaginative, down-to-earth planning, these small islands will multiply and grow across the whole spectrum of social and personal needs.

In the fortunes of ordinary people like Ojit's family, one can see that the responsibility of rich nations is directly related to freedom and to the future of the world. As each individual in a nation is given the opportunity to live fully, to situate his struggle in areas beyond that of mere survival, the whole human race is enriched.

Until a Pakistani's struggle for his daily bread be eased; until he ceases to say: "For my own survival and my family's, I must get one rice meal a day;" until he no longer need grit his teeth and endure the effects of untreated, debilitating disease; until that time, freedom remains but an aspiration, a seed badly in need of irrigation. Far too often a Pakistani farmer's worn body strains all day in a muddy field with this object in view and no other: love has the dimensions of a bowl of rice.

It is no new discovery that freedom gains a foothold only after certain basic material needs are filled. By this criterion, most parts of the non-Western world are still waiting to experience freedom's most elementary form.

Freedom in religious obedience

BY SISTER M. LAWRENCE

To be is to OBEY. We did not make ourselves. It is God's creative Word that "makes" us. But to be is also to be FREE: to think, to love, to choose, to respond. Deep in the roots of our being is the need both to hear and to answer, to obey and to be free. The word "obedience" comes from the verb "to hear." "Do you hear?", we say: meaning, "do you understand?" and "what are you going to do about it?" We need to hear, to understand and to obey, in order to become a person. We need to be faithful to our own insights and to the claims of our situation. We need to follow the claims of understanding faithfully and freely. This is to obey in the biblical sense of the word. And this is to be on the path that leads toward God.

Living is largely responding. Life calls us to both give and take, and in the call of Life there sounds the call of God. It is this call a young woman hears and answers when she enters religious life. It is this call both to obey and to be free that she remains keen about, grows always keener about, if she chooses to really live her life.

She has been invited and she consents to special responsibility for the Kingdom of God. It is a big decision and she grows much by making it. She breaks through the world's type-cast of her and finds herself wonderfully freed of a whole set of social pressures, inhibitions and limitations. She becomes one of the world's non-conformists, and soon she starts to look the part in black stockings and baggy garb. But she does so in the manner of the prophet who truly loves the world, not of the defeatist who despairs of it. And there is sun and song in her, and a rare joy. She is free, more free than she ever was before, to become the person she is called to be, a woman completely given to following and serving the Lord Jesus. In her, obedience and freedom bless each other and there is promise of a rich, full, human life in Christ.

What happens to this non-conformist as the years roll on? Her freedom will either grow or wither, and with it her life as a person and as a religious. Let us admit it from the start, she could in her own chosen realm, outconform the world's conformists and become one of a "long black line" walking, talking, and smiling emptily alike. She could. At every moment freedom or unfreedom is her choice. She always has her life in her hands to give away and find, or to preserve and lose. This is a frightful thing. Surely there is nothing more deadly than a deadly Sister, a woman called to freedom and fullness

of Life who becomes progressively more reserved in her answer until the original dialogue turns into a deadly stillness and the initial yes into a final no. Surely it is easy to get tired, or frightened, and to "draw the line" when demands are so constant and exhausting. Surely there are men and women in every walk of life who cannot bear the weight of their own freedom, who refuse to act decisively, who drift like dead wood with the current of their community and lend nothing to it.

A religious woman who is like this, who has become dull, narrow, unimaginative, pharasaical, impersonal, a petty king in some petty kingdom; is surely a special disappointment to the whole people of God. We feel we have a right to expect more of a woman who publicly proclaims her radical dedication to freedom for the Kingdom of God and its demands. But the initial choice is just that: initial. It requires confirmation in

the turn each moment takes. Fidelity to the initial promise is always liable to be eclipsed, but obedience constantly confirms and reconquers it. "No" is at the root of the dynamics of unfreedom and devitalization. "Yes" is the power behind another dynamic, the dynamic of an ever growing freedom. A religious professes to be positive. She promises her will, not her lack of it, to God. Obedience is primarily willing, choosing with God, choosing God; not denying one's own will. It is one's own will moving in, locked in, God's. It is a very creative thing. It is God's Word always waking you up, calling you in every detail of life, to go freely out of yourself. It frees you from yourself. It tunes you to the real world, to its demands and opportunities. Superiors, Sisters, work, people and their human needs, rules, the moment and its potential: all that is part of the actual situation becomes sign and sacrament of God's personal love and plan. Each is an invitation to discovery and response.

The Sister who strives and thrives in obedience is the one who seeks her Lord everywhere, in everything and everyone; wherever it is God's will for her to be. Wherever she is, she builds unity, for the call to do so is everywhere. Schooled by obedience, she listens sensitively and responds warmly to every person and situation. Right there where her Lord is, at the fine point of His will for her, she comes freely to meet Him, full of welcome and ready to respond. She may or may not like the place, the moment, the task, the personalities involved, but she lives by choice, not taste. And she knows by faith that this here and now, just as it is, is for her Bethlehem and Nazareth and Calvary. She chooses with enthusiasm and a spirit of adventure to be there, and to meet and serve Christ there. And so she goes to meet life as it comes to meet her. She blesses life and it blesses her. She spreads a climate of freedom and joy in her community. If she is a missionary she spreads it in the whole world.

As Medical Mission Sisters we experience the positive force of obedience in our lives as a force to make us free with the freedom of God's Sons; as a force to make us responsible for the call of Christ in the needs of others; as a force to keep us in dialogue with God, with the needs of our times and our world. It strengthens our sense of purpose and gives us a chance to test and train its genuineness. It calls us constantly to the task of building unity on every level, everywhere, with God, community, superiors, Sisters, and with all men. It makes us free to serve the needs of other's freedom. It is the "Yes" in us.

for further information on the vocation of the Medical Mission Sisters, write:

MEDICAL MISSION SISTERS
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NOTES from our houses

VENEZUELA

A People In Need

We have so many really sick people. Although the hospital is small, there is always a real variety of cases. The area is going down, or as they say in the States, is becoming a "depressed" area. Every month there is a large group of Creole employees retired or transferred. Our poor patients increase and stay at the quota constantly. It really hurts to refuse care, but the line is endless.

Recently, twelve priests came to Caripito to give a week-long mission. They broke up into groups of two and went into all the different barrios. We have a total population of nearly 50,000, with one priest! Please keep this mission in your prayers. Everyone is working so hard to make it a success.

Sister M. Anita
Holy Family Hospital, Caripito

INDIA

Hot Spot

The rains have broken, thanks be to God! The nurse in the newborn nursery came to me to complain that the air conditioner was not working properly and the babies were all getting heat rash. I checked and it was 92° in the room, even with the air conditioner on. I went outside in the corridor and it was 105°. I went outside the building and stood in the corner near the air conditioner and the thermometer went up to 122°! How could the machine perform properly in such overwhelming heat? It has been almost impossible to cool the sterilized baby formulas enough to put into the coolers without overtaxing the cooler. At room temperature they were 105°-110°—just some of the joys of nursing in Delhi!

Sister M. Pascal
Holy Family Hospital, New Delhi

VIETNAM

Say What You Mean

My "soothing talk" to a patient in labor still depends heavily on my tone of voice, because I'm never quite sure that she understands me. The proper thing to say when spoken to by a superior is *za* or *ya,* depending on the speaker's dialect. This usually means an affirmation. I've come to find out that after a series of *za! za!,* I must add, "Do you understand?" More often than not the reply comes back: "Your child hears you but doesn't understand." Encouraging!

Last week in ante-natal clinic I realized that one of the ladies was trying very hard not to laugh. I had just finished scolding her for not coming to clinic regularly and tried to impress her with the importance of coming the following week. Suddenly I realized what I had said: "You didn't come next week, but you must come back last week." She didn't laugh until I did, which I think took pretty much control.

Sister Sheila Marie
Holy Family Hospital, Quinhon

GHANA

What Grows On Trees

The rains have started and everything is blooming. You cut the grass one day and two days later it's up five inches! We have an extraordinary tree out back. It has two kinds of grapefruit on it and one portion (a third one) produces

oranges. It's fantastic the way things grow here. At the carpenter's shop we have a lean-to. The props are sturdy branches from the flamboyant tree (red and orange flowering tree). Yesterday, I looked at one of the props and by golly right out of the bark there's a lovely bunch of flowers, a cluster about twelve inches in diameter. I thought someone had just put it there, but, no sir, it's growing!

Sister M. Paula
Holy Family Hospital
Techiman

JORDAN

From Fast to Feasting

The *Eid el Fitr* has finally come. It is the big Muslim feast that marks the end of *Ramadan,* their month of fast. The month of *Ramadan* is one without food, drink or smoking from 6:00 A.M. to sunset, a real feat because the fasters are still expected to do a normal day's work. The majority of our patients, the male nurses and all the cleaners are Muslims. Monday morning

about 1:30 A.M. the cannons began to boom (just like New Year's Eve in Venezuela) and we realized that they had seen the moon and the feast was about to begin. During the month of fast someone used to come around at 3:00 every morning with a drum to wake the fasters (and us), warning them to get up and eat before sunrise. At the feast, all the Muslims had to pay this man for waking them. Some of us, I fear, felt like shooting him!

Sister M. Leonard
Muashir Memorial Hospital, Amman

EAST PAKISTAN

Much More Than Bengali

It is one thing to hear about the natural "religiousness" of the East and another thing to experience it. One evening I was sitting on our roof here at Holy Family Hospital in Dacca going over a Bengali lesson with a young Pakistani girl who was a rather long-term patient with us. She was an exceptionally lively young lady, full of fun, even to the point of showing me how the "teddy girls" of East Pakistan have modernized the traditional shalwar and chamise. She was also a born teacher and was helping me very much with my Bengali conversation.

Just as we reached a most lively and interesting point in our lesson, the beautifully haunting chant of the *muessin* from a nearby mosque came to our ears. Without saying a word, Rezia, my teenage teacher, quietly put her *dupata* (shoulder veil) over her head and her finger on her lips, and we both sat in silence until the prayer-chant was finished. I cannot say how edified I was by this simple and sincere recognition on the part of this young Moslem girl of God's first place in our lives. "My times are in thy hands, O God." Razia had taught me much more than Bengali that evening.

Sister M. Gerard
Holy Family Hospital, Dacca

UGANDA

Bit By Bit

Our safaris will start again in November. In the meantime, some of the parishioners at Kyasumba up in the mountains took up a collection which they gave to Father, telling him it was to start a hospital so we could go up there to stay. The total: $7.65—but it's a start!

Sister M. Philip
Holy Family Hospital, Fort Portal

VENEZUELA

Thirst Aid

One day while I was in the Isolation Ward doing exercises with a polio child, I heard the little boy across the hall crying out, *"Yo quiero un Pepsi-Cola, Yo quiero un Pepsi-Cola."* (I want a Pepsi-Cola.) Then there were a few moments of silence. Again the same cry followed. As I was not

able to leave the room immediately, I cried out to him, *"No hay Pepsi-Cola."* (There is no Pepsi-Cola.) Silence reigned. Why didn't I think of this earlier? I guess I spoke too quickly for he answered me with, *"Pues, agua!"* (Then water.)

Sister M. Anton
Holy Family Hospital, Maracaibo

WEST PAKISTAN

Picnic, Pakistani Style

Spring is the time for picnics. True to tradition, we organized our 46 nurses' aides for their annual picnic last Sunday. Sister Kieran and I set out from the hospital with five of the girls and the food to meet the others at the bus stop in the city. Now this may sound simple, but let me tell you what a Pakistani picnic involves.

First of all, there is the very important question of clothes. You wear your good silks on a picnic. One girl asked for time off the day before so that she could prepare her outfit. Then there is the food. Sandwiches are fine but not for a picnic. For a picnic to be really fun, a full hot meal must be served, hot rice, chicken curry, special *chappatis, pakoras* and hot tea. Naturally, hot food demands stoves and cooking utensils; and stoves necessitate kerosene, alcohol and stove pins. The food must be prepared in big cooking pans which have to be tied up in large squares of cloth to make them easy to carry. Finally, you never go on a picnic without renting a camera, and a rented transistor radio is also nice.

As you might suspect, when we finally got underway, we looked like an army ready to march. However, no one even gave us a second glance as we walked to the bus stop, since in Pakistan, "everyone does it this way."

Sister M. Petra
Holy Family Hospital, Rawalpindi

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"Individual freedom alone can make a man voluntarily surrender himself completely to the service of society. If it is wrested from him, he becomes an automaton and society is ruined. No society can possibly be built on a denial of individual freedom. It is contrary to the very nature of man and just as a man will not grow horns or a tail so he will not exist as man if he has no mind of his own. In reality even those who do not believe in the liberty of the individual believe in their own."

Mahatma Gandhi

"The unity of the Church is a unity which protects freedom and brings power from God to know 'the truth which makes us free,' to curb self-centered pride and to remain firm in humble service to mankind."

Augustin Cardinal Bea

A message from Pope Paul VI hailed the idea of ending observances marking the twentieth year of the United Nations with a religious convocation.

"It is right and proper," said the Pope, because "what value, in fact, would the principle of the dignity of man, who has been created free by God, have, or what value would the principle of solidarity among nations—on which the entire structure of the United Nations is supported—possess, if the idea of the universal fatherhood of God be excluded?"

CATHOLIC ACCENT
July 1, 1965

"Where the mind is without fear and the head is held high; where knowledge is free; where the world has not been broken up into fragments by narrow domestic walls; where tireless striving stretches its arms toward perfection; where the clear stream of reason has not lost its way into the dreary desert sand of dead habit; where the mind is led forward by Thee into everwidening thought and action—into that heaven of freedom, my Father, let my country awake."

Rabindranath Tagore

"The shade of a shield is not enough to cause stable societies to grow and free institutions to flower in integrity. Pope John XXIII reminded us that peace would be only 'an empty-sounding word' unless it rested upon, as he put it, '. . . An order founded on truth, built according to justice, vivified and integrated by charity, and put into practice in freedom.' That is an imperative of morality among nations—to integrate the system of nations and peoples by charity, not the charity of callous and calculating dole, but the compassionate charity of learning and love. This, too, has been—and will continue to be—the purpose of the American people: to maintain in our policies toward all nations a spirit of compassion and caring. For, we believe, as Pope John said, 'There is an immense task incumbent on all men of good will, namely, the task of restoring the relations of the human family in truth, in justice, in love and in freedom.' "

President Lyndon B. Johnson
Catholic University of America
June 6, 1965

"Every manifestation in the Church of lack of freedom, however harmless, however much under cover, whatever religious trimmings it may have, contributes toward making the Church less believable in the eyes of the world and in men in general; and that is a disaster. . . . The ground and source of man's freedom lies, not in man himself, who is by nature the slave of sin, but in the freedom of God, in the freedom of His grace setting us free in Christ. 'Where the spirit of the Lord is, there is liberty.' (St. Paul)"

Hans Kung

"There will be no complete freedom as long as there is starvation, hunger, lack of clothing, lack of necessaries of life and lack of opportunity for every single human being, man, woman and child in the country."

Prime Minister Nehru

"We would like to hope, and in our prayers we ask this favor from God, that once the legitimate aspirations of people for liberty and independence have been satisfied, the richer will aid the poorer, the stronger support the weaker, the more advanced hold out a helping hand to the less developed and, in the end, that all will feel themselves brothers, for all are sons of the same loving Father who is in heaven."

Pope John XXIII

"All men are called to belong to the new People of God . . . The state of this People is that of the dignity and freedom of the sons of God, in whose hearts the Holy Spirit dwells as in His temple."

Constitution on the Church

THE MATERNITY

A virgin freely chooses to conceive God's Son.
Her "yes"
makes every virgin, mother;
rocks the world with its tremendousness.

Sister Miriam Therese S.C.M.M.

Mr. & Mrs. Edward Froelich
339 Southmont Blvd.
Johnstown, PA 15905

A word from our Sister-housekeeper:

"We hate to rub it in but . . .

Holy Family Hospital, Dacca, Pakistan, is in hot water. Brand new laundry — — need washing machines. Please help us!"

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